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FEC FORM 1

STATEMENT OF ORGANIZATION

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				Office Use Ohry N FR
NAME OF COMMITTEE (in full)	(Check if name is changed)	e Example:If typ over the lines.	* * * * * * * * * * * * * * * * * * *	34M5
B. I. T. C. O. 1. 14 . S.	U.P.E.R. PAC	abbreviia	Hipp BT	C PAC
ADDRESS (number and street	1157 Pri	1, ce 5, t	1 1 1 1 1 1 1	
(Check if address is changed)	New Jor	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	KW LLL	1,001,2-[3,1,3,7]
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADD	RESS (Please provide only o	one e-mail address)		
(Check if address	A.U.s.t.i.n.A	1,e,x,a,1,de,5	-BB;+(1011	IN Jupler PACLOR
is changed)				
COMMITTEE'S WEB PAGE	ADDRESS (URL)			
(Check if address	WINING BLIT	CIDII INI SINIPIE	15, PA, C, 1015	
is changed)				
2. DATE	27 2013			
3. FEC IDENTIFICATION	NUMBER	005516	8 9	
4. IS THIS STATEMENT	NEW (N)	R AME	NDED (A)	
I certify that I have examine	d this Statement and to the	best of my knowledge	and belief it is true,	correct and complete.
Type or Print Name of Treas	surer Allan St	6/0		
Signature of Treasurer	Celley.	Jan	Date	11/27/2013
NOTE: Submission of false, en	rroneous, or incomplete inform			ment to the penalties of 2 U.S.C. §437g.
Office Use		Federal Ele	r Information contact:	FEC FORM 1

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5.	TYPE	OF C	COMMITTEE			
	Can	didate	e Committee:			
(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate		
	Name Cand					
	Cand Party	idate Affiliatio	ion Sought: House Senate President	State District		
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Cand					
	Part	y Con	mmittee:			
	(d)			ocratic, blican, etc.) Party.		
	Poli	tical A	Action Committee (PAC):			
	(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a		
			Corporation Corporation w/o Capital Stock Lat	oor Organization		
			Membership Organization Trade Association Co	operative		
			In addition, this committee is a Lobbyist/Registrant PAC.			
	(f)	D	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party		
			In addition, this committee is a Lobbyist/Registrant PAC.			
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
	Join	t Fund	draising Representative:			
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal eandidate.	more political		
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political		
		Com	nmittees Participating in Joint Fundraiser			
		1.				
		2.	Prec to number			
		3.	FEC ID number C			
		4.	FEC ID number			

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Write or Type Committee Nam	9	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor
NONE III		
Mailing Address		1111
		1-1
	CITY STATE ZIP	CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Leaden	ship PAC Sponsor
		J
7. Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in possess	sion of committee
E. II Nama IT.R.E.	A, S, u, R, E, P, , , , , , , , , , , , , , , , ,	
	A.44AN, S.T.E.V.O.	
Mailing Address	_	
	Men Jork Wy 1/00/	21 1 71 2 2
		2-13,13,7
Title or Position	CITY STATE ZIP	CODE
TREASURER	Telephone number 3251-174	21-17431
8. Treasurer: List the name ar any designated agent (e.g.,	ad address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name of Treasurer	a, n, , S, t, e u a , , , , , , , , , , , , , , , , , ,	
Mailing Address	11,5,7, Pri, 14e, 5+1.11111111111111111111111111111111111	1 1 1 1
		Z]-[3,1,3,7
Title or Position	200.74	
TREASURER	Telephone number $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 0 \end{bmatrix} - \begin{bmatrix} 7 & 7 \\ 1 & 0 \end{bmatrix}$	21-14434

9.

FEC Form 1 (Revised 02/2009)	age 4
Full Name of Designated AUSTIN E. ALEXANDER	
Mailing Address	
	لبيب
CITY STATE ZIP COD	
Title or Position ASSIS 1 5 + 101 11 TREASURER Telephone number 305 - 7.4.3-	
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds account safety deposit boxes or maintains funds.	s, rents
Name of Bank, Depository, etc.	
T.D. B.A.N.K. Mailing Address 16.6.6. B.R.D.A.D.QA.S.	<u> </u>
NEW JARK 110012-	(0 ₁ 0 ₁ 5 ₁ 0
CITY STATE ZIP COL	DE
Name of Bank, Depository, etc.	
Mailing Address	لبيب
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	لسبا
CITY STATE ZIP COL	DE

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Washington DC

Federal Election Commission 999 E Street NW

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked JSPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED

(8/2013)